

We respect your **PRIVACY** and will not share your personal information with any third party.

REGISTRATION & WAIVER OF LIABILITY

First Name: please print	Middle Initial:	Last Name:	
Address:			
City:	State:	Zip Code:	
Home Phone:	Cell Pho	ne:	
Birthday:	Referred	by:	
Occupation:	Work Phone:		
Email Address:			
Please list any previous and current conditions, ailments, injuries and/or surgeries and their dates of occurrence:			
Emergency Contact:			
Relationship:	Phor	ne:	
Release & Waiver of Liability – please read and sign reverse			
1 – I agree that I am participating in yoga classes at Kali Yuga Yoga located at 1011 Fatherland St., Nashville, Tennessee starting on (date), during which I will receive information and instruction about yoga and health. I recognize that yoga may require some physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.			

* * * Continued on Reverse Side * * *

2 – I understand and acknowledge that I am to receive instruction in yoga theory and exercises (postures) only, and I will not hold you, your partners, instructors, or employees to any higher standard of care than that applicable to instructors of yoga theory and exercises (postures).

- 3 I understand that it is my responsibility to consult with a physician prior to and regarding my participation in yoga classes at Kali Yuga Yoga. I represent and warrant that I am physically fit and I have no medical condition which would prevent my full participation in yoga classes at Kali Yuga Yoga.
- 4 In consideration of being permitted to participate in yoga classes at Kali Yuga Yoga, I agree to assume full responsibility for any risks, conditions, injuries or damages, known or unknown, which I might incur as a result of participating in Kali Yuga Yoga classes. I will notify my instructor of any change in my condition prior to my participation in a class.
- 5 In further consideration of being permitted to participate in yoga classes at Kali Yuga Yoga, I knowingly, voluntarily and expressly waive any claim I may have against Kali Yuga Yoga, its instructors, staff and owners, for any injury or damages that I may sustain as a result of participating in their classes.
- 6 I further acknowledge and agree that all waivers, releases, and covenants made herein are binding on my heirs or legal representatives; that venue and jurisdiction over and disputes is proper only in the court in Davidson County, Tennessee; that I have no other understanding with Kali Yuga Yoga whether verbal or written, which conflicts with the provisions of this document.
- 7 I, my heirs or legal representatives, forever release, waive, discharge you from negligence or other acts.

I have read the above Release and Waiver of Liability and fully understand its contents as well as the Refund/Cancellation Policies. I voluntarily agree to the terms and conditions stated above.

Registrant's Signature:	Date:
If registrant is under 18 years of age, a parent or legal guardian's	s authorization is required:
Print name & Sign:	Date:

We reserve the right to refuse admittance. We are not responsible for lost or stolen items. All rates are non-refundable, non-transferable and non-extendable. Please note this before you buy a class card. These are guided classes. You have to be willing to follow instructions from your teacher.

This is a legal instrument. If you do not fully understand it, please consult with an attorney before signing.